

06-011-01

ET150396511US

A

THE ASSISTANT COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Docket No. AUS920010260US1Date: 5/31/01

Sir:

Transmitted herewith for filing is the Patent Application of:

Inventors: **Scott J. Broussard**

For: **SYSTEM AND METHOD FOR ENCAPSULATING SOFTWARE COMPONENTS IN AN
APPLICATION PROGRAM INTERFACE USING A PROXY OBJECT**

Enclosed are: **Assignee Name: International Business Machines Corporation**
Assignee Residence: Armonk, New York

49 pages patent specification, claims, and abstract (not including title page)19 pages of informal drawings (Figs. 1 - 19)X Declaration executed by all inventorsX Assignment executed by all inventors a certified copy of a application Information Disclosure Statement, form PTO-1449, and references -

The filing fee has been calculated as shown below:

Total Claims	<u>17</u> - 20 = <u>0</u>	X \$18.00 =	\$0.00
Indep. Claims	<u>3</u> - 3 = <u>0</u>	X \$78.00 =	\$0.00
Basic Fee			\$710.00

Total	\$710.00
-------	----------

X Please charge by Deposit Account No. 09-0447 in the amount of \$710.00. A duplicate copy of this sheet is enclosed.X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 09-0447. A duplicate copy of this sheet is enclosed.X Any additional filing fees required under 37 CFR 1.16.X Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

By Cynthia S. Byrd

Attorney Name: Cynthia S. Byrd

Registration No.: 39,365

Intellectual Property Law Dept.

IBM Corporation

11400 Burnet Road -- 4054

Austin, Texas 78758

Telephone (512) 823-5884

05/31/01



09870622-053101

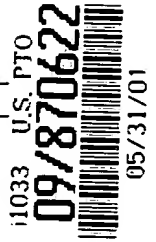


ET150396511US

THE ASSISTANT COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Docket No. AUS920010260US1

Date: 5/31/01



Sir:

Transmitted herewith for filing is the Patent Application of:

Inventors: **Scott J. Broussard**

For: **SYSTEM AND METHOD FOR ENCAPSULATING SOFTWARE COMPONENTS IN AN APPLICATION PROGRAM INTERFACE USING A PROXY OBJECT**

Assignee Name: International Business Machines Corporation

Enclosed are:

Assignee Residence: Armonk, New York

49 pages patent specification, claims, and abstract (not including title page)

19 pages of informal drawings (Figs. 1 - 19)

X Declaration executed by all inventors

X Assignment executed by all inventors

 a certified copy of a application

 Information Disclosure Statement, form PTO-1449, and references -

The filing fee has been calculated as shown below:

Total Claims	<u>17</u> - 20 = <u>0</u> X \$18.00 =	\$0.00
Indep. Claims	<u>3</u> - 3 = <u>0</u> X \$78.00 =	\$0.00
Basic Fee		\$710.00

Total \$710.00

X Please charge by Deposit Account No. 09-0447 in the amount of \$710.00. A duplicate copy of this sheet is enclosed.

X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 09-0447. A duplicate copy of this sheet is enclosed.

X Any additional filing fees required under 37 CFR 1.16.

X Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

By Cynthia S. Byrd

Attorney Name: Cynthia S. Byrd

Registration No.: 39,365

Intellectual Property Law Dept.

IBM Corporation

11400 Burnet Road -- 4054

Austin, Texas 78758

Telephone (512) 823-5884

11033 U.S. PTO
09/870622
05/31/01



POST OFFICE TO ADDRESSEE



* E T 1 5 0 3 9 6 5 1 1 U S *

ORIGIN (POSTAL USE ONLY)			DELIVERY (POSTAL USE ONLY)		
PO ZIP Code	Day of Delivery <input type="checkbox"/> Next <input type="checkbox"/> Second	Flat Rate Envelope <input type="checkbox"/>	Delivery Attempt	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Date In Mo. Day Year	<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	Postage \$	Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Time In <input type="checkbox"/> AM <input type="checkbox"/> PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee	Delivery Attempt	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Weight lbs. ozs.	Int'l Alpha Country Code	COD Fee Insurance Fee	Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials	Total Postage & Fees \$	<input type="checkbox"/> WAVE OF SIGNATURE (Domestic Only) Additional merchandise insurance is void if owner of insured article does not obtain signature of addressee on delivery receipt. If delivery is made without signature of addressee, carrier's signature constitutes valid proof of delivery.		

CUSTOMER USE ONLY	
METHOD OF PAYMENT Express Mail Corporate Acct. No.	Federal Agency Acct. No. or Postal Service Acct. No.
FROM: (PLEASE PRINT) PHONE <u>512, 823-1009</u> IBM Corporation IB Law Dept -4054 11400 Burnet Rd Austin, Tx 78758	TO: (PLEASE PRINT) PHONE () Box Patent Applications Assistant Commissioner for Patents Washington, D.C.
ZIP + 4 <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px 5px;">2</div> <div style="border: 1px solid black; padding: 2px 5px;">0</div> <div style="border: 1px solid black; padding: 2px 5px;">2</div> <div style="border: 1px solid black; padding: 2px 5px;">3</div> <div style="border: 1px solid black; padding: 2px 5px;">1</div> <div style="margin: 0 5px;">+</div> <div style="border: 1px solid black; padding: 2px 5px;">0</div> <div style="border: 1px solid black; padding: 2px 5px;">0</div> <div style="border: 1px solid black; padding: 2px 5px;">0</div> <div style="border: 1px solid black; padding: 2px 5px;">1</div> </div>	

PRESS HARD.
You are making 3 copies.

FOR PICKUP OR TRACKING CALL 1-800-222-1811

www.usps.com



Mailing Label
Label 11A June 2000